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ABSTRACT

This paper presents a problem-solving process for stress management, which is based on the premise that the ability to manage stress is a survival skill necessary for parents if they are to provide a home environment conducive to children's social, emotional, and mental growth. The materials delineate a four-stage model for the: (1) identification of stress; (2) analysis of the sources of stress; (3) development of a stress management plan; and (4) implementation and evaluation of the management plan. Relaxation techniques, cognitive restructuring, positive addiction, time management, support systems, and professional assistance are described in detail as effective stress management techniques. These coping techniques are suggested as appropriate methods for reducing tension and improving the quality of home life. (Author/ JAC)

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DEALING WITH STRESS: A MAJOR COMPONENT

OF

A PARENT EDUCATION PROGRAM

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Dealing With Stress: A Major Component of a Parent Education Program

With the psychological demands of preadolescent parenting coupled with social and economic responsibilities, many parents are experiencing too much stress. Stress, in moderate doses, is beneficial. In overdoses, it can destroy the body, the mind, and the emotions.

In this paper, stress refers to excessive anxiety, frustration, or boredom. Using the definition of Herbert Benson (1975) in the book, The Relaxation Response, it means "environmental demands that require behavioral adjustments."

It has been recognized that the home environment correlates highly with the student's school achievement and personal adjustment. Parents, however, find it difficult to maintain a relaxed, positive atmosphere because of the everyday pressures of job and money worries, illnesses, and large and small emergencies. Behaviors reflecting tension are often displayed in the presence of the child or children, producing feelings of fear, hostility, insecurity, and other unhealthy attitudes. While no parent or family can behave ideally at all times, it appears worthwhile to the student to make family life peaceful and cooperative. For this reason the writers feel a parent education program must include a model for stress reduction.

The Physiology of Stress

As a consequence of the seminal work of the physiologist, Dr. Hans Selye, (1950) professor emeritus of the University of Montreal, biological, social, and behavioral scientists are increasing their understanding of stress. Perhaps Selye's most significant contribution to an understanding of stress is his concept of the "general adaptation syndrome," a notion that helps one comprehend the effects of stress on the body. The general adaptation syndrome divides stress into three stages: (1) the alarm reaction, (2) the resistance stage, and (3) exhaustion.

The alarm reaction entails bodily changes associated with emotions. The bodily changes are initiated by the sympathetic division of the autonomic nervous system. The sympathetic division increases the heart rate and blood pressure, and distributes blood more copiously to the exterior musculature.

In contrast to the sympathetic division of the autonomic nervous system, the parasympathetic division attends the day-to-day functioning of organs. When one manifests emotion, the sympathetic division overrules the parasympathetic division, producing a number of symptoms. Under conditions of fear, blood circulation is altered; the blood supply to the viscera is restricted while the supply to the exterior muscles of the trunk and limbs increases. Thus, the process of digestion is curtailed in favor of increasing the potential for movement, either in defense or retreat. Concurrently, nervous impulses to the heart cause it to beat faster and harder; blood pressure increases and pulse rate accelerates. In addition to such alterations to normal circulation, the pupils of the eyes dilate and the mouth becomes dry. Harvard physiologist Walter B. Cannon viewed such adaptation as the body's preparation to act or to respond to stress. The response actually selected, in his model, existed somewhere along a continuum whose poles were defense against the threat and flight from the threat. He called the continuum of possible responses the "fight or flight" response (Everly and Girdano, 1980).

When the sympathetic division becomes ascendant over the parasympathetic division, the adrenal glands hypersecrete epinephrine (or adrenalin) and norepinephrine. These hormones are secreted directly into the blood stream. Epinephrine releases more blood sugar, thus making more energy available to the brain and muscles. It also stimulates the heart to beat faster. Thus, epinephrine augments and complements the action of the sympathetic division. Norepinephrine constricts peripheral blood vessels, thus raising blood pressure.

If stress continues for sometime, one enters the resistance stage. In this stage one recovers from the initial outburst of emotion and attempts to endure the emotion-producing situation as well as possible. The person's attempt to endure emotion places relatively high degrees of strain on bodily and psychological resources.

If the stress is overwhelming and the individual is unable to cope with or manage the stress, he or she enters the third stage, exhaustion. In this stage, all internal resources for managing stress are exhausted, even though the original sources of stress, called stressors, and any new stressors which may have arisen during the resistance phase continue to distress the individual. If exhaustion continues, its consequences is death.

Individuals may develop a wide variety of behavioral and/or physical symptoms and/or diseases as internal resources are depleted. These particular symptoms and diseases, both psychological and physical, that develop in response to stressors depend upon at least three factors: (1) the individual's idiosyncratic vulnerabilities, (2) the kinds of stressors which initiate the response, and (3) the individual's perceptions of the external and internal environments in which one currently functions.

Some of the common stress-related disorders are: (1) heart attacks, (2) stroke, (3) gastrointestinal dysfunctions, (4) cardiovascular disease, (5) increased susceptibility to infectious diseases, (6) ulcers, (7) skin disorders, (8) backaches, (9) more rapid aging, (10) sexual dysfunctions, (11) accident proneness, (12) hypertension, (13) insomnia, (14) muscle pains, (15) severe headaches, (16) prolonged fatigue, (17) psychoneurotic behavior, (18) psychiatric disorders, (19) drug abuse, (20) alcoholism, (21) difficulty in concentrating and attending to the task at hand, (22) increased irritability and argumentativeness, (23) increased opposition to new ideas, (24) cynicism about one's work, and (25) marital difficulties.

The Stress Management for Improved Parenting Skills Model developed by the Psychological Services Center of the Virginia Polytechnic Institute and State University (1978) is a problem-solving process that can be helpful to parents and other adults. The model utilizes four stages. Stage I is the Identification of Stress, Stage II is Analysis of the Sources of Stress, Stage III is the Development of a Stress Management Plan, and Stage IV is the Implementation and Evaluation of the Stress Management Plan. These stages are elaborated below.

Stage I – Identification of Stress

Stage I is predicated upon the notion that a parent cannot manage stress unless he or she can identify it. Identification of stress requires one to know the indications of stress. The signs of stress can be divided into physiological, psychological, and behavioral manifestations (Everly and Girdano, 1980). Physiological signs include such effects as (1) increased heart rate, (2) increased blood pressure, (3) increased sweating, (4) muscular trembling or tension, and (5) increased epinephrine and norepinephrine secretions. Levitt (1967) lists seven signs to indicate the presence of psychological stressors. They are (1) lower intellectual functioning, (2) poorer verbal communications, (3) resentment of supervisory personnel, (4) suspicion of supervisory personnel, (5) anger, (6) increased emotional reactiveness, and (7) confusion or anxiety. Cooper and Payne (1978) see evidence of stressors in such behavior as (1) decreased performance levels, (2) increased alcohol and drug abuse, (3) increased error rates, and (4) occupational sabotage.

Stage II – Analysis of the Sources of Stress

Stage II, the analysis of the sources of stress, addresses the fact that one cannot manage stress unless one knows its source or sources. For the purpose of stress management the external and internal environments that interact within the individual parent are seen as the sources of stressors.

Within the external environment some common sources of stress are the family and the work site. Some common stressors within the family are: (1) marital problems, (2) parenting problems, (3) changes in family residence, (4) family disorganization, (5) family

members leaving home, (6) death of a family member, (7) health problems, and (8) financial problems. Common stressors within the work place are: (1) beginning a new job, (2) upward mobility, (3) relocation, (4) retirement, (5) work overload, (6) inactivity and boredom at work, (7) uncertainity stemming from role and status ambiguity, (8) lack of job security, (9) overspecialization, (10) bureaucracy, (11) stifled communication, (12) poor interpersonal relations with authority figures and subordiantes, (13) political and manipulative machinations in the work environment, (14) discrimination, and (15) technological change.

Internal sources of stress from which stressors emerge include cognitive and physical factors. Cognitive factors are focused in the thoughts, ideas, beliefs, and perceptions one has concerning the activating events in one's life and the various experiences one undergoes in day-to-day living.

The insertion of negative statements about oneself and other irrational ideas into one's internal dialogue stimulates self-defeating behavior. Such behavior generates stress.

Psychologists Albert Ellis and Robert A. Harper (1975) have catalogued countless variations of the "musts," "shoulds," and "if onlys" of wishful and self-punishing thinking in an analysis that shows how faulty thinking keeps parents from facing reality. Here are some of these ideas which are particularly related to parenting:

1. The idea that it is a dire necessity for a parent to be loved or appreciated every moment by a child.

2. The idea that one must be thoroughly competent and successful in parenting if one is to consider oneself worthwhile.

3. The idea that the child who disagrees wtih the parent's ideas and methods is "bad" and becomes an opponent to be rejected.

4. The idea that one should become very upset over the child's problems and failings.

5. The idea that it is awful and catasrophic when the child does not behave as one would like.

6. The idea that one's unhappiness is caused by the child and that the parent has little or no ability to control one's emotional reactions.

7. The idea that, until the child straightens himself/herself out and does what is right, the parent has no responsibility to do what is right.

8. The idea that there is invariably a right, precise, and perfect solution to human problems and that it is catastrophic if that solution is not found.

9. The idea that one can achieve maximum human happiness by inertia and inaction or by passively and uncommitedly enjoying oneself.

Each of these irrational ideas is a source of stress and, therefore, a stressor that hampers efficient parenting.

The physical sources of stress are focused in the manner in which one cares for his/her body and in the degree to which one rationally and actively lives a healthy life. It should be noted that physical stressors can have deleterious psychological consequences as well as physical results. Excessive us of tobacco and alcohol, drug abuse, poor or unbalanced diet, lack of exercise, sleep disturbance, and inappropriate use of medication contribute to stress.

Physical stressors have short-range as well as long-term consequences. The medical problems associated with these stressors, in the long-run, if unresolved or inadequately managed, can result in death. Consequently, these stressors have the most deleterious long-range effects that parents must confront.

Behavioral indicators of stress include ineffective resistance to stressful stimuli. These behavioral indications are observable by others. Among these observable or objective signs of stress are interpersonal indications, physical risk behavior, and work-related behaviors. Interpersonal indications include such behaviors as an increase in the number and intensity of arguments with family members and friends; increased irritability demonstrated in verbal and physically aggressive behavior; impatience with others; and aggression turned in upon the self; expressed through overworking, carelessness, procrastination, and hyperactivity; and excessive emotionality such as inappropriate laughing, crying, and sighing. Physical risk behaviors that can indicate stress include increased alcohol consumption; smoking; over- or undereating; increased use of medications such as analgesics, "downers," and "uppers;" changes in sleeping habits; and a decrease in exercise or a considerable increase or decrease in physical activity. Signs of work-related stress are increased absenteeism and tardiness, decreased work performance or professional competence, and impaired work productivity, creativity, and dependability.

It should be emphasized that the behavioral manifestations identified immediately above do not always and unequivocally indicate stress, unless they occur repeatedly, and increase in intensity and frequency in the relative absence of incapacitating physical illness.

Stage III – Development of a Stress Management Plan

After signs of stress have been identified and the source or sources of the stressor or stressors determined, the individual is ready to move to a management plan. An individual's

particular stress management plan can utilize one or more of the effective techniques that follow: (1) relaxation exercises, (2) cognitive restructuring, (3) health habit changes, (4) positive addiction changes, (5) time management, and(6) obtaining social support or help from others.

One important technique in managing stress is acquiring skill in eliciting "the relaxation response," a mechanism that nature has provided to help one manage or resist inevitable stress. There are several methods of achieving the relaxation response. Meditation, autogenic relaxation, biofeedback-aided relaxation, and neuromuscular relaxation are all examples. One of the easiest programs for personal development is prescribed by Herbert Benson (1975). His focus is on muscle relaxation and can be applied at home, or at the worksite. The steps are as follows:

1. Sit quietly in a comfortable position.

2. Close the eyes.

3. Beginning at the feet and progressing up to the head, tense and then relax all of the muscles.

4. Breathe through the nose, becoming aware of the breathing. Inhale slowly and then exhale slowly. Repeat the cycle 10 to 15 times.

5. When finished, one should sit quietly for several minutes, first with the eyes closed and later with the eyes opened.

6. Practice the technique once or twice daily but not within two hours after any meal, since the digestive processes seem to interfere with eliciting the relaxation response.

It is desirable to know the signs of the relaxation response as well as the signs of stress. The relaxation response is characterized by (1) decreases in respiration rate, heart rate, muscle tension, and metabolism, (2) changes in blood chemistry and changes in blood flow–away from the skeletal muscles–resulting in a sense of warmth in the hands and feet, and (3) increased digestion.

Development of the ability to relax has short-range and long-term consequences. In the short term, relaxation increases one's ability to manage current stress, generates pleasant feelings of personal well-being, and frequently generates increased creativity and innovativeness. Long-range consequences of continued use of relaxation make parenting more satisfying and the home environment more conducive to positive child growth.

Of the several approaches to cognitive restructuring, one of the most effective elementary discussions is presented by Howard S. Young (1974) in A Rational Counseling Primer. He makes use of an A-B-C-D-E Model. A refers to activating events or experiences; B refers to beliefs, ideas, or thoughts about A; C is the consequence (emotional reaction) that

stems not from A but from B about A; D refers to the necessity to dispute, debate, question, or challenge one's irrational beliefs (B); and E refers to the effects of disputing or debating or questioning or challenging one's irrational beliefs. B and E are the heart or core of the Ellisonian classic approach to cognitive restructuring.

Another stress management plan involves changing the parent's health habits. Changing one's health habits generally involve three processes. First, one can maintain those health-producing habitual behaviors already acquired; second, one can decrease those harm producing habits (for example, by reducing caloric or alcohol intake) and third, one can increase "good" health habits such as eating a balanced diet, and getting an adequate degree of physical exercise.

Simply intending to change one's health habits is inadequate in effecting change. Change can be facilitated by four activities: (1) recording the frequency of the occurrence of the habit, (2) setting realistic attainable behavioral goals, (3) reinforcing the occurrence of the new behavior by rewarding such behavior, and (4) evaluating and remaking the goals in line with realistic and attainable time.

Another strategy for stress management involves becoming positively addicted to a new activity. The concept of positive addiction is developed in a book with the same title by William Glasser (1976). Glasser postulates that certain physical or mental activities, when done regularly, become addictive in a positive way. Further, he believes that persons who are positively addicted can cope with stress and be successful in what they do. Activities such as running, meditating, riding a bike, or reciting psalms, when done regularly and chosen freely, can have a positive and soothing effect. Glasser feels anything a person chooses to do that meets the following six criteria contributes to positive addiction and will have a favorable impact on the individual. An activity can be addictive in a positive way if:

1. It is a noncompetitive activity to which one devotes about an hour a day.

2. It is easy to do and does not take a great deal of mental effort.

3. It can be done alone and does not depend on others.

4. The one doing it believes it has some physical, mental, or spiritual value.

5. The one doing it believes that he/she will improve as a result of performing the activity.

6. It can be done unaccompanied by criticism.

The parent must remain self-accepting during the time it is practiced or it will not be addictive.

Time management, the next stress management plan, refers to the processes of actively structuring one's time in ways that facilitate the reduction of stress and increase the probability that personal and professional goals will be attained. One can manage time by structuring one's own activities in ways that reduce the number of stressors that have to be confronted and by organizing one's day so that time remains to accomplish the essentials in day-to-day activities. One should observe several caveats in scheduling the time in one's day. One should not overload the schedule; overloading dooms one to failure. Further, one should schedule time for tasks that produce personal enjoyment. Finally, one should follow the schedule conscientiously.

The parent can join with others in stress-reduction efforts. One of the most effective methods is to develop a support system. Sharing the burden can be comforting. At times of serious threat, it is essential to discuss difficulties with one or more individuals in whom the person can have confidence and trust. An understanding but not unduly sympathetic confidant can help the parent put problems in proper perspective. The confidant can suggest solutions and help examine alternatives. Discussion helps the parent identify, clarify, and define the problem, even if nothing more concrete comes from the conversation.

The help of other professionals frequently assists the management of stress. Counseling; psychotherapy; or legal, economic, medical, and religious advice are often indicated as stress management techniques, for both preventive and curative purposes.

In developing a stress management plan, it is essential that one does not perseverate by following a habitual response that may or may not be effective. One way of eluding perserveration is the generation of several alternative stress reducing plans.

From among the various alternatives, it is necessary that at least one be selected for implementation. Selection of alternatives involves evaluation of all the alternatives that have been identified. There are at least three criteria against which each alternative must be judged.

These are:

1. The desirable and undesirable short-term consequences that are likely to emerge if the alternative is selected.

2. The feasibility of each alternative. Feasibility takes into consideration the individual's life-style, the likely degree of support from significant others and the likelihood of positive reinforcement from those societal elements with which the individual most strongly identifies.

3. The long-term probably effects of each alternative. The alternative which most closely meets the criteria is selected as the first-order stress management plan, while the "runner-up" alternative becomes the "back-up" plan.

Stage IV – Implementation and Evaluation

The next step in the model is implementation of the plan and its evaluation. It is a fact that unless a plan is implemented, it is completely without value, only something that might have been. Since one learns only what one does, action is a sine qua non if stress is to be managed rather than mismanaged.

Evaluation of the plan entails a determination of the degree to which resistance to stress has been increased by the activities implicit in the stress management plan. If physiological, psychological and behavioral signs of stress have decreased, the plan is effective. If these signs remain unchanged or worsen, reexmaination of the plan at each stage is required. The original plan as modified through the evaluation process, or the back-up plan, or a combination of the two is implemented instead.

Summary

There are no easy ways or simple solutions to the problems of life which cause undue stress and tension. Moreover, stress affects different people differently. Because some parents let the pressures "get to them" quicker than others, it is impossible to predict when a parent will become overburdened and fall victim to it. How stressfully a parent reacts to the environment is determined, to a large extent, by attitudes, values, personality, emotional development, and the ability to alter the influence of the environment through such factors as relaxation techniques, cognitive restructuring, health habits, positive addiction, time management, and a social support system.

Since stress is an integral and inescapable part of human existence, it is advantageous for the school to provide an educational program which teaches tension reduction strategies to parents. Coping techniques, such as those outlined in the paper, can greatly reduce tension and improve the quality of life for the child or children in the home. The school receives compensation for such training when the student or students manifest behaviors which are more acceptable and demonstrate increased academic achievement.

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